

**State of Tennessee**  
**DEPARTMENT OF SAFETY**  
**1148 FOSTER AVENUE**  
**COOPER HALL**  
**NASHVILLE TN 37210**

**TENNESSEE INTERNATIONAL FUEL TAX AGREEMENT APPLICATION**

**IF YOU HAVE AN ACCOUNTING OR REPORTING FIRM WHO WILL FILE YOUR APPLICATIONS AND RETURNS, A POWER OF ATTORNEY DOCUMENT MUST ACCOMPANY THIS APPLICATION.**

<b>PLEASE PRINT OR TYPE</b>				
<b>1. FEDERAL IDENTIFICATION NUMBER OR SOCIAL SECURITY NUMBER</b>		<b>IRP ACCOUNT NUMBER</b>		<b>REGISTRATION YEAR</b>
<b>2. APPLICANT'S LEGAL NAME</b>		<b>3. APPLICATION TYPE:</b> <input type="checkbox"/> ORIGINAL <input type="checkbox"/> REINSTATEMENT <input type="checkbox"/> RENEWAL <input type="checkbox"/> SUPPLEMENT		
<b>4. TRADE/DBA NAME(IF DIFFERENT THAN LEGAL NAME)</b>			<b>AREA CODE-TELEPHONE NUMBER</b>	
<b>5. PHYSICAL ADDRESS:</b>	<b>STREET</b>	<b>CITY</b>	<b>STATE</b>	<b>ZIP CODE</b>
<b>6. MAILING ADDRESS:</b>	<b>STREET</b>	<b>CITY</b>	<b>STATE</b>	<b>ZIP CODE</b>
<b>7. CONTACT PERSON'S NAME</b>			<b>AREA CODE-TELEPHONE NUMBER</b>	
<b>8. LOCATION OF RECORDS:</b>	<b>STREET</b>	<b>CITY</b>	<b>STATE</b>	<b>ZIP CODE</b>
<b>9. BUSINESS TYPE:</b>	<input type="checkbox"/> INDIVIDUAL	<input type="checkbox"/> PARTNERSHIP	<input type="checkbox"/> CORPORATION	<input type="checkbox"/> LLC
<b>10. PRINT OR TYPE PARTNER'S OR CORPORATE OFFICER'S NAME(S), TITLE, AND RESIDENCE ADDRESS.</b>				
<b>NAME</b>	<b>TITLE</b>		<b>RESIDENCE ADDRESS</b>	
<b>11. INDICATE TYPES OF FUEL USED:</b> <input type="checkbox"/> DIESEL <input type="checkbox"/> GAS <input type="checkbox"/> LPG <input type="checkbox"/> GASOHOL <input type="checkbox"/> NATURAL COMPRESSED				
<b>12. DO YOU HAVE BULK STORAGE LOCATED IN TENNESSEE?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO				
<b>13. NUMBER OF QUALIFIED MOTOR VEHICLES REQUIRING TENNESSEE IFTA DECALS _____ (NO FEE REQUIRED)</b>				

**CERTIFICATION-THE APPLICANT AGREES TO COMPLY WITH REPORTING, PAYMENT, RECORD KEEPING AND DISPLAY REQUIREMENTS AS SPECIFIED IN THE INTERNATIONAL FUEL TAX AGREEMENT. THIS APPLICATION WHEN SIGNED AUTHORIZES THE STATE OF TENNESSEE TO WITHHOLD ANY REFUND OF TAX OVERPAYMENT, IF DELINQUENT TAXES ARE DUE ANY MEMBER IFTA JURISDICTION. FAILURE TO COMPLY WITH THESE PROVISIONS SHALL BE GROUNDS FOR REVOCATION OF THE IFTA LICENSE IN ALL MEMBER JURISDICTIONS.**

**PLEASE COMPLETE FRONT AND BACK OF THIS DOCUMENT**

HAVE YOU EVER BEEN LICENSED IN ANOTHER IFTA JURISDICTION? \_\_\_\_\_

WAS THE LICENSE EVER REVOKED? \_\_\_\_\_ IS THE LICENSE STILL UNDER REVOCATION? \_\_\_\_\_

PLACE AN X IN ALL JURISDICTIONS IN WHICH YOU PLAN TO OPERATE

PLACE A Y IN ALL JURISDICTIONS IN WHICH YOU MAINTAIN BULK STORAGE

JURISDICTION	OPER	BULK	JURISDICTION	OPER	BULK
AL (ALABAMA)			NC (NORTH CAROLINA)		
AK (ALASKA)			ND (NORTH DAKOTA)		
AZ (ARIZONA)			OH (OHIO)		
AR (ARKANSAS)			OK (OKLAHOMA)		
CA (CALIFORNIA)			OR (OREGON)		
CO (COLORADO)			PA (PENNSYLVANIA)		
CT (CONNECTICUT)			RI (RHODE ISLAND)		
DE (DELAWARE)			SC (SOUTH CAROLINA)		
DC (DISTRICT OF COLUMBIA)			SD (SOUTH DAKOTA)		
FL (FLORIDA)			TN (TENNESSEE)		
GA (GEORGIA)			TX (TEXAS)		
ID (IDAHO)			UT (UTAH)		
IL (ILLINOIS)			VT (VERMONT)		
IN (INDIANA)			VA (VIRGINIA)		
IA (IOWA)			WA (WASHINGTON)		
KS (KANSAS)			WV (WEST VIRGINIA)		
KY (KENTUCKY)			WI (WISCONSIN)		
LA (LOUISIANA)			WY (WYOMING)		
ME (MAINE)			AB (ALBERTA)		
MD (MARYLAND)			BC (BRITISH COLUMBIA)		
MA (MASSACHUSETTS)			MB (MANITOBA)		
MI (MICHIGAN)			NB (NEW BRUNSWICK)		
MN (MINNESOTA)			NF (NEW FOUNDLAND)		
MS (MISSISSIPPI)			NS (NOVA SCOTIA)		
MO (MISSOURI)			NT (NORTHWEST TERRITORIES)		
MT (MONTANA)			ON (ONTARIO)		
NE (NEBRASKA)			PE (PRINCE EDWARD ISLAND)		
NV (NEVADA)			PQ (QUEBEC)		
NH (NEW HAMPSHIRE)			SK (SASKATCHEWAN)		
NJ (NEW JERSEY)			YT (YUKON)		
NM (NEW MEXICO)			MX (MEXICO)		
NY (NEW YORK)					

UNDER PENALTY OF PERJURY, I DECLARE THAT, AS TAXPAYER OR PREPARER, I HAVE EXAMINED THIS RETURN, INCLUDING ACCOMPANYING FORMS AND STATEMENTS, AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, IT IS CORRECT AND COMPLETE.

\_\_\_\_\_  
(SIGNATURE)

\_\_\_\_\_  
(DATE)

\_\_\_\_\_  
(TITLE)